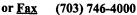
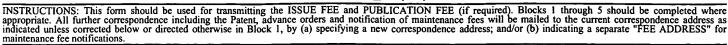
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CONFIRMATION NO. 225/50312 09/930,480 08/16/2001 Jens Bohlen-9945 09/23/2004 RFEKADU2 00000104 TITLE OF INVENTION: STEERING COLUMN FOR MOTOR WIBLICIES O 1730.00 0F 300.00 0F 15.00 OF 03 FC:8001 SMALL ENTITY PUBLICATION FEE APPLN. TYPE ISSUE FEE TOTAL FEE(S) DUE DATE DUE nonprovisional \$1330 \$300 \$1630 10/28/2004 **EXAMINER** ART UNIT **CLASS-SUBCLASS** ROSENBERG, LAURA B 3616 280-777000 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 2. For printing on the patent front page, list 1\_Crowell & Moring LLP (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. 'Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Stuttgart, Germany DaimlerChrysler AG Please check the appropriate assignee category or categories (will not be printed on the patent); individual \(\frac{\sqrt{\sq}}}}}}}}}}}}}} \signtimeseptrimeset}\sqrt{\sqrt{\sqrt{\sqrt{\sq}}}}}}}}}}} \end{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sq}}}}}}}}}}}} \end{\sqrt{\sqrt{\sqrt{\sq}}}}}}}} indentinesept}}}}} \endittimeseptintity}}}}} \end{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\ 4a. The following fee(s) are enclosed: 4b. Payment of Fce(s): X Issue Fee A check in the amount of the fee(s) is enclosed. ☑ Publication Fee (No small entity discount permitted) ☐ Payment by credit card. Form PTO-2038 is attached.  $\square$  The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 05-1323 (enclose an extra copy of this form). 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